

## **Annual Breed Reproductive Bank Signatory Authorization**



Use this form to authorize the AKC $^{\circ}$  to accept the signature of the individual(s) listed as sire owner on frozen semen litter applications for frozen semen owned by the organization. Must be submitted annually.

Information about	the Organi	ization																	
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Principal Officer Na	ame												_				_	_	
Signature of Bringi	nol Officer										Date			- L		-			
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Information about	individual	s authoriz	ed to s	ign fo	or the	Orga	aniza	tion											
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Signature																			
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First Name		LastNa		Ш	Ш														
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Signature of Club P	resident											Mont	h	Day	/	Y	ear		
General Information	on and Inst	ructions																	
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Purpose	your organ																		ut
Mailing	Send the	completed	form to	: Tł	ne Am	erica	n Ken	nel (	Club	)									
Address				80	)51 Ar	co Co	rpora	ate D	rive		e 10	0							
					aleigh														
Assistance	Email AKC Monday –	Cat info@a Friday, 8:3	ikc.org ( in AM –	or call · 8·00	919-2 PM Ir	233-30 nform:	629 to ation	o spe abou	ak t	to AK e rea	C Cu istrat	istom ion ar	er Re nd re	egist	ratic lina	n S nroc	uppo	ort, es	
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